## **Sully Governmental Center Community Room Application Form**

Applications may be turned in via mail, fax, or may be dropped off.

(All fields are required) Name of Organization:		
Name of Contact Person:		-
Name of Second Contact Person:		
Address:		_
Phone Number:		
Fax Number:		-
Email Address:		
Reservation Date Requesting:		_
Times Requesting: From AM/PM to	A	.M/PM
Number of People Expected:		_
Room use is not approved until confirmation is ma	de by the Supervisor	's office.
The undersigned agrees to indemnify and hold harmless Fairfax County and its employees with respect to any claim of loss, injury, or damage because of negligence of the user or users employees or agents, including damage to County property. The undersigned shall be held liable for any and all damages to property by use and for prompt and proper settlement of claims for such damages. The undersigned further certifies that he or she has read and understands the rules and regulations pertaining to the use of the community room and agrees to comply with them.		
	Please Return to:	:
(Signature)	Supervisor Mich 4900 Stonecroft	Boulevard
(Printed Name)	Chantilly, Virgin	iia 20151
(Date)	Phone: 703 814 7 Fax: 703 814 71	